PTO/SB/06 (08-00)
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U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD	Application or Docket Number
	7124.023

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)		NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE (37 CFR 1.16(a))					$ 0	OR		$ 770
TOTAL CLAIMS (37 CFR 1.16(c))	35	minus 20 =	* 15	x $ 9 =	0	OR	x $ 18 =	270
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5	minus 3 =	* 2	x 43 =	0	OR	x 86 =	172
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			0	+ 140 =	0	OR	+ 280 =	0
* If the difference in column 1 is less then zero, enter "0" in column 2				TOTAL	0	OR	TOTAL	1212

CLAIMS AS AMENDED - PART II

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	** 20	= 0	x $ 9 =	0	OR	x $ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	*** 3	= 0	x 43 =	0	OR	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	=	x $ 9 =	0	OR	x $ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	=	x 43 =	0	OR	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	=	x $ 9 =	0	OR	x $ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	=	x 43 =	0	OR	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SEND TO: Mail Stop Patent Application
Commissioner For Patents, PO Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number: 7124 - 023

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	35	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	35 minus 20=	* 15
INDEPENDENT CLAIMS	5 minus 3 =	* 2
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐			OR	OTHER THAN SMALL ENTITY	
	RATE	FEE		RATE	FEE
BASIC FEE		385.00	OR	BASIC FEE	770.00
	X$ 9=		OR	X$18=	270
	X43=		OR	X86=	172
	+145=		OR	+290=	
	TOTAL		OR	TOTAL	1212

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.